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**** CONTINUING DATA *******
 This application is a CON of 08/240,877 05/11/1994 PAT 6,854,463 which is a DIV of 07/981,244
 11/25/1992 PAT 5,325,892
 which is a CIP of 07/891,289 05/29/1992 ABN **KB**

**** FOREIGN APPLICATIONS ******* **KB**

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 06/11/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 2	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 1
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Verified and Acknowledged Adam Brandt **ACB**
 Examiner's Signature Initials

ADDRESS
32692

TITLE
FILTERING FACE MASK THAT HAS A NEW EXHALATION VALVE

FILING FEE RECEIVED 926	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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